2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002008

FILED Apr 14, 2006 Secretary of State

Entity Name: SAXON WOODS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8009 S ORANGE AVE 8009 S ORANGE AVE KISSIMMEE, FL 34744 ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

8009 S ORANGE AVE 8009 S ORANGE AVE KISSIMMEE, FL 34744 ORLANDO, FL 32809

FEI Number: 65-0833201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LELAND MGMT., INC. 8009 S ORANGÉ AVE ORLANDO, FL 32809 US

OFFICERS AND DIRECTORS:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BAKUN, MAREK MILLER, ROBERT W Name: Name: 151 SOUTHHALL LANE STE. 200 Address: 558 WOODFORD DR Address:

MAITLAND, FL 32751 City-St-Zip: City-St-Zip: DEBARY, FL 32713

Title: () Delete Title: (X) Change () Addition MATHIS, DEBBIE Name: BARRY, FRANCES Name:

Address: 151 SOUTHHALL LANE STE. 200 Address: 154 BRASSINGTON DR City-St-Zip: MAITLAND, FL 32751 City-St-Zip: DEBARY, FL 32713

Title: STD () Delete Title: (X) Change () Addition

PARKER JR, EDWARD FRANKEHI, JANICE Name: Name: 151 SOUTHHALL LANE STE. 200 512 FERN LAKE TERR Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: DEBARY, FL 32713

() Delete Title: D Title: (X) Change () Addition

SMITH, BOB Name: Name: BERGEN, PAUL J 111 BRASSINGTON DR. 320 BURCHINGTON DR Address: Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: DEBARY, FL 32713

Title: () Delete Title: (X) Change () Addition

QUALLS, KIM HARSHBARGER, BRYAN P Name: Name: 160 BRADWICK CIRCLE 512 HILLSHIRE DR Address: Address: DEBARY, FL 32713 City-St-Zip: City-St-Zip: DEBARY, FL 32713

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT MILLER Ρ 04/14/2006